	Effective October 1, 2000												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TO	TAL CLAIMS		100	/2 ·			Ī	RATE	FEE		RATE	FEE	7
FOF	1		NUMBER	FILED	NUMBER EXTRA			Basic FEE	355.00	OR	BASIC FEE	710.00	1
TOT	AL CHARGEA	BLE CLAIMS	(06 minus 20=		. 86			X\$ 9=		OR	X\$18=	1548	
INDI	PENDENT CL	AIMS	14 m	inus 3 =	11			X40=		OR	X80=	880	ĺ
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	-	ĺ
• 15 1	he difference	in column 1 is	iess than z	ero, ente	er "O" in c	column 2	Į	TOTAL		OR	TOTAL	3148	
H	the difference in column 1 is less than zero, enter '0' in column 2									,	OTHER		1 8
	1 30/04	(Column 1)			mn 2)	(Column 3)		SMALL	ADDI-	OR I	SMALL	ADDI-	1 .9
NTA		REMAINING AFTER AMENDMENT		NUA PREVI	ABER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
DME	Total	. 105	Minus	1./(	00			X\$ 9=		OR	X\$18=	<u></u>	1.
AMENDMENT	Independent	· 15	Minus		14	- (		X40=		OR	X80±	86.00	pd.
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		ľ
(	2/21/04	,		(Coli	umn 2)	(Column 3)		TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		1
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NU PREV	MEST MBER MOUSLY D FOR	PRESENT		RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE	
100	Total	. 95	Minus	- /	25	-/		X\$ 9=		OR	X\$18=	<u> </u>	
MEN	Independent	. 13	Minus	1/	5	1	1	X40≤		OR	X80=		1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT SEATT							+135=		OR	+270=		1
	1,13,23;32,46,58,107,108 114,126444241,128,164444,(column3)							TOTAL ADDIT FEE		ОП	ADDIT FEE		1
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIC NU PREV	SHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus			-		X\$ 9=		OR	X\$18=		1
	Independent	•	Minus	• • • •		-	1	X40=		OF	X80=		
IId	LIDST PRES	ENTATION OF	MULTIPLE D	EPENDE	NI CLAI	M L				1		1	i

+135=

Application or Docket Number

<sup>&</sup>quot;If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the Teghest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the Teghest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The Teghest Number Previously Paid For" (Total or Independent) is the highest number lound in the appropriate box in column 1. OR ADDIT. FEE